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| Child FIRST/Family Services:Sighting of infants under two Years of agePolicy and Practice RequirementNovember 2019 |
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# Introduction

## Background

This policy and practice requirement advice will provide updated guidance on the minimum requirement for Child FIRST and Family Services practitioners and organisations to sight infants under two years of age prior to the closure of a case, where a referral has been received for families in relation to a wellbeing concern for an infant under two years of age.

Infants are extremely vulnerable to the effects of abuse, neglect and deprivation. These early experiences affect physical health, emotional regulation and mental health across the life course, as well as their capacity for full engagement and participation in relationships, education and employment. The particular vulnerability of infants arises from their physical fragility, dependence on others for survival and development, underdeveloped verbal communication and their social invisibility.

This policy and practice requirement has been developed in response to a recent Child Death Inquiry recommendation by the Commission for Children and Young People (CCYP). The CCYP recommendation is that:

*“Family Services policy be updated to reinforce the importance of practitioners sighting infants under two years of age, prior to the closure of a case”.*

While this policy applies to children under two, best practice would be for all Children to be sighted, in particular children under the age of five.

For the purpose of this policy and practice requirement ‘Family Services’ incorporates the following programs and services: Integrated Family Services, Cradle to Kinder, Aboriginal Cradle to Kinder, Intensive Family Services (200 hours), Changing Futures, Evidence-Based Programs in Family Services, Families First, Aboriginal Family Preservation and Restoration, Stronger Families, Aboriginal Stronger Families and Aboriginal community controlled organisations services – Family and community services and Aboriginal child specialist advice and support services.

## Legislative and policy context

The *Children Youth and Families Act 2005* (the Act)provides the legislative basis for an integrated system of services for vulnerable children, young people and their families.

The legislative context promotes the safety, wellbeing and healthy development of children. In accordance with the Act, community-based child and family services are required to provide their services in relation to a child in a manner that is in the best interests of the child. For further information the [Best Interests Framework and Best Interests Principles](http://www.cpmanual.vic.gov.au/our-approach/best-interests-case-practice-model/best-interests-case-practice-summary-guide) <https://www.cpmanual.vic.gov.au/our-approach/best-interests-case-practice-model/best-interests-case-practice-summary-guide> can be found on the Child Protection Manual website.

In addition to theBest Interests Principles, Child FIRST and Family Services are also guided by a set of nine principles that focus on outcomes and solutions for working with families, as outlined in[*A strategic framework for Family Services*](file:///%5C%5CN171%5CGROUP%5CCommunity%20Services%20Branch%5CEarly%20Pathways%20Unit%5CFamily%20Services%5CWorking%20Folders%5CErin%5CProcedural%20requirements%5Cstrategic%20framework%20for%20Family%20Services)<http://providers.dhhs.vic.gov.au/family-services>.

[A strategic framework for Family Services](http://providers.dhhs.vic.gov.au/family-services) outlines the importance of Family Services having a ‘child centred, family-focussed approach’. A child centred, family-focussed approach involves listening to the child (or young person) within families and taking their needs and wishes into account in the assessment and planning process.

For infants under two years of age, observation of and age appropriate interaction with the infant in addition to the observation of caregiver and infant interactions and family dynamics are important aspects in developing the assessment of the family to inform decision making and goal planning for further work with the family (or rationale for closure).

# Updated policy advice

## Child FIRST

If it has been assessed that a home visit to the family is required, there should be active and where required, assertive attempts to sight any infant under two years of age during the home visit for the purposes of assessing their safety, wellbeing and development in line with the Best Interest Framework and principles. These attempts should be clearly documented in the client’s case notes.

Child FIRST practitioners should attempt to make home visit/s with parent/s at a time when the infant will be in their care. If the parent/s do not agree to the practitioner sighting the infant, the practitioner should discuss this with their team leader or practice leader to determine an appropriate course of action. If it is assessed that the infant has suffered or is likely to suffer significant harm, then an appropriate course of action should include a section 38 consultation with Community Based Child Protection.

## Family Services

Ongoing case work should include the regular sighting and assessment of children; including infants under two years of age. Where appropriate this includes engagement with children, to ensure the voice of the child is considered in assessment and case planning. Sighting and assessment of children, particularly children under the age of two, should occur at all assessment and review points in a case, including review for closure. This will support a case work approach which is child centred and ensure ongoing assessment of the child/infant’s safety, wellbeing and development.

Family Services practitioners should attempt to make home visits with parent/s at a time when the infant will be in their care. Client’s case notes should clearly document when infants have been sighted during appointments and any observations relevant to the assessment of the infant’s safety, wellbeing and development should be recorded. If the parent/s do not agree to the practitioner sighting the infant the practitioner should discuss this with their team leader or practice leader to determine an appropriate course of action. If it is assessed that the infant has suffered or is likely to suffer significant harm, then an appropriate course of action should include a section 38 consultation with Community Based Child Protection.

### Assessment Guidance

Any case that is closed in Child FIRST and/or Family Services, where the referral was in relation to a wellbeing concern for an infant under two years of age, should clearly evidence all attempts to sight any infant under two years of age in the client’s case notes. What reasonably constitutes active and assertive attempts are assessed on a case by case basis dependant on the individual family situation and should include consideration of reasons for referral, level of assessed risk to the child and formal and informal supports that are in place for the family on closure.

Practitioners should work in collaboration with Maternal Child Health and other services as appropriate to determine the level of wellbeing concern for an infant under two years of age and to agree on any proposed follow up prior to Child FIRST or Family Services closing the case. This should be clearly documented.

The [Best interests case practice model: Specialist practice resource - Infants and their families](https://www.cpmanual.vic.gov.au/our-approach/best-interests-case-practice-model/infants-and-their-families) <https://www.cpmanual.vic.gov.au/our-approach/best-interests-case-practice-model/infants-and-their-families> and the [Child development and trauma specialist practice resources](https://www.cpmanual.vic.gov.au/our-approach/best-interests-case-practice-model/child-development-and-trauma) <<https://www.cpmanual.vic.gov.au/our-approach/best-interests-case-practice-model/child-development-and-trauma>> provide advice and guidance around important aspects of assessment and ongoing work with infants and their families.

Child FIRST and Family Services should use the [Infant response decision tool](https://www.cpmanual.vic.gov.au/advice-and-protocols/tools-and-checklists/infant-response-decision-tool) <https://www.cpmanual.vic.gov.au/advice-and-protocols/tools-and-checklists/infant-response-decision-tool> to support in their assessment and case planning when working with families where there is a wellbeing concern for an infant under two years of age.

## Action Required

* It is the responsibility of individual organisations to communicate this requirement to staff and update existing policies, procedures and documentation to ensure this policy and practice requirement is incorporated.
* Where appropriate organisations should ensure that practitioners have the adequate level of training and support to make decisions regarding the sighting and assessment of safety, wellbeing and development of children, including infants under two.
* It is recommended that Alliances ensure the implementation of suitable networking and referral pathways with early years services for joint practice and where deemed appropriate secondary consults including opportunities for upskilling practitioners - both Child FIRST/Family Services in regard to early years practice and for early years services in regard to working with complex families and trauma.

## Resources

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| [Best Interests Case Practice Model](http://www.cpmanual.vic.gov.au/our-approach/best-interests-case-practice-model/best-interests-case-practice-summary-guide) | <http://www.cpmanual.vic.gov.au/our-approach/best-interests-case-practice-model/best-interests-case-practice-summary-guide> |
| [A strategic framework for Family Services](https://providers.dhhs.vic.gov.au/strategic-framework-family-services-implementation-plan-pdf) | <https://providers.dhhs.vic.gov.au/strategic-framework-family-services-implementation-plan-pdf> |
| [Best Interests case practice model: Specialist practice resource- Infants and their families](https://www.cpmanual.vic.gov.au/our-approach/best-interests-case-practice-model/infants-and-their-families) | <https://www.cpmanual.vic.gov.au/our-approach/best-interests-case-practice-model/infants-and-their-families> |
| [Best Interests case practice model: Specialist practice resource- Child Development and trauma](https://www.cpmanual.vic.gov.au/our-approach/best-interests-case-practice-model/child-development-and-trauma) | <https://www.cpmanual.vic.gov.au/our-approach/best-interests-case-practice-model/child-development-and-trauma> |
| [CP Manual-Infant response decision tool](https://www.cpmanual.vic.gov.au/advice-and-protocols/tools-and-checklists/infant-response-decision-tool) | <https://www.cpmanual.vic.gov.au/advice-and-protocols/tools-and-checklists/infant-response-decision-tool> |
| [Victorian Cradle to Kinder and Aboriginal Cradle to Kinder Practice guide](https://providers.dhhs.vic.gov.au/victorian-cradle-kinder-and-aboriginal-cradle-kinder-practice-guide-word) | <https://providers.dhhs.vic.gov.au/victorian-cradle-kinder-and-aboriginal-cradle-kinder-practice-guide-word> |

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